



-CH

16463

Docket No. 40314-A/JPW/MVM

In re Application of: Thomas M. Jessell et al.

Serial No.: 10/002,278

Examiner: E.B. O'Hara

Filed: November 2, 2001

Group Art Unit: 1646

For: CLONING, EXPRESSION AND USES OF DORSALIN-1

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

October 3, 2003

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S I R:

Transmitted herewith is an amendment to the above-identified applications.

X Small entity status of this application under 37 C.F.R. § 1.27 has been established by a verified statement previously submitted.

 a verified statement to establish small entity status under 37 C.F.R. § 1.9 and §1.27 is enclosed.

X No additional fee is required

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
Total Claims	9	-	* 42	=	*** 0	X	9	18	=	0	0
Indepen- dent Claims	1	-	** 3	=	*** 0	X	42	84	=	0	0
Multiple Dependent Claim(s) Presented <u> </u> Yes <u>X</u> No							140	280		0	0
For First Time:							TOTAL ADDITIONAL FEE		\$ 0.00		

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in the this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

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Amendment Transmittal Letter
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The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment of the number of claims as originally filed.

_____ Please charge Deposit Account No. _____
In the amount of \$ _____.

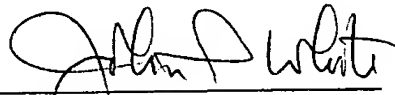
_____ A check in the amount of \$ 55.00 is enclosed.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-3125. Three Copies of this sheet are enclosed.

X Any filing fees under 37 C.F.R. \$1.16 for the presentation of extra claims.

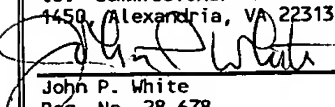
X Any patent application processing fees under 37 C.F.R. \$1.17.

Respectfully submitted,



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I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


John P. White
Reg. No. 28,678

Date

70/3/03